

Provider Inspection Summary
For the period 07/01/2003 to 06/30/2006
Adult Family Home

Facility Information

Facility Name: VALLEY HAVEN (0009187)
Address: N3315 MILLER ROAD, LACROSSE, WI 54601
License Status: REGULAR
Licensed/Certified/Registered 11/10/2000
Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History

Survey ID: 0094707 **End Date:** 03/09/2005 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009739 Served 04/29/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.04(5)(b)	TRAINING-8 HOURS ANNUALLY		
88.06(2)(b)	SERVICE AGREEMENT EXCEPT RESPITE		
88.07(2)(b)4	RECORD OF MEDICAL VISITS AND REPORTS		
88.07(3)(d)	MEDICATION- WRITTEN ORDER		
88.09(1)(a)	RESIDENT RECORDS		

Survey ID: 0090992 **End Date:** 08/13/2003 **Type:** STANDARD **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10006346 Served 09/06/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
88.07(2)(b)4	RECORD OF MEDICAL VISITS AND REPORTS		
88.07(3)(d)	MEDICATION- WRITTEN ORDER		

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.